

2936 N. McVay Drive • Mobile, AL 36606 Phone: 251-433-1600 • Fax: 251-433-1605

Thank you for your interest in the Cardiac and Vascular Institute of Ultrasound. Enclosed is the enrollment application. Please be sure to indicate the specific program for which you are applying. Admission is based on a composite entrance score. You may apply for any quarter throughout the year, but applications must be submitted at least two weeks before the start of the desired quarter. Enrollment will close once all available positions for a given quarter are filled.

The application process is designed to evaluate whether the applicant demonstrates the academic ability, professionalism, and personal qualities necessary to succeed in the program. It also serves to help the applicant determine whether a career in cardiovascular ultrasound is the right fit.

To apply, please complete the following steps:

- Submit a completed and signed Application for Admission form.
- Request an official copy of your transcript be sent directly to CVIU.
- VA-funded students must ensure that all prior transcripts, including military records, are submitted.
- Submit your ACT or SAT scores.
- Take the CVIU "Learning Ability" test during your visit to the school.

Within one week of receiving your complete application, a CVIU representative will notify you by email confirming receipt and will schedule your interview.

Following the interview, you will receive a letter within two weeks informing you of your admission status or providing an explanation if your application is not approved.

Please submit your completed application by mail, fax, or email to:

Cardiac and Vascular Institute of Ultrasound Attn: Admissions 2936 N. McVay Drive Mobile, AL 36606

Fax: (251) 433-1605

Email: admissions@ultrasound.edu

Please review the CVIU entrance requirements carefully and ensure that you meet the qualifications under one of the three prerequisite options offered.



Cardiac and Vascular Institute of Ultrasound Entrance Requirements:

The following admissions prerequisites are designed to ensure that students enter the program with the foundational knowledge and academic preparation necessary for success in a rigorous healthcare curriculum. Applicants are expected to demonstrate competency in core subject areas through formal coursework and standardized testing. Meeting these requirements does not guarantee admission but establishes eligibility for consideration.

Applicants must complete all required coursework at an accredited high school, college, or university. Official transcripts and standardized test scores must be submitted directly to the Office of Admissions as part of the application process.

1. Educational Credentials:

- Applicants must hold one of the following:
 - o A high school diploma from an accredited institution, or
 - o A General Educational Development (GED) certificate or its equivalent, or
 - o A regionally or nationally recognized international equivalent.

2. College-Level Education:

- Applicants must also have completed one of the following prior to matriculation:
 - o A bachelor's degree from a regionally accredited college or university, or
 - o An associate degree from a regionally accredited college, or
 - A minimum of 48 semester credit hours (or the equivalent) of college-level coursework at an accredited institution.

3. Standardized Test Scores:

- Applicants must submit official scores from one of the following standardized tests:
 - o **ACT**: A minimum composite score of **18** is required.
 - o **SAT**: A minimum total score of **960-980** is required.

4. Prerequisite Coursework:

In addition to meeting the degree or credit-hour requirement above, all applicants must have successfully completed the following prerequisite courses, with a grade of "C" or better in each course.

Prerequisites may have been completed at the undergraduate or post-baccalaureate level. Below are **examples of commonly accepted course titles and numbers** from accredited institutions. Actual course numbers and titles may vary by college or university. Applicants should consult their institution's course catalog and contact the Office of Admissions if they are unsure whether a course satisfies a requirement.

a. Basic Science:

- One (1) course in a basic natural science discipline, such as:
 - o BIOL 101 General Biology I
 - o BIOL 221 Microbiology for Health Sciences
 - o CHEM 101 General Chemistry I with Lab
 - o PHYS 101 Introduction to General Physics I (Algebra-based).

b. Mathematics:

- One (1) college-level mathematics course from the following:
 - o MATH 110 College Algebra
 - MATH 115 Elementary Statistics (preferred)
 - MATH 120 Pre-Calculus
 - o MATH 210 Calculus I

Developmental or remedial-level math courses (e.g., *Basic Math*, *Pre-Algebra*) do not fulfill this requirement.

c. English Communication:

- One (1) course in written or oral communication, such as:
 - ENG 101 English Composition I
 - ENG 102 English Composition II
 - o COMM 101 Introduction to Public Speaking
 - SPCH 105 Speech Communication

d. Anatomy and Physiology:

- A complete sequence of human Anatomy and Physiology coursework:
 - BIOL 201 Human Anatomy & Physiology I with Lab and BIOL 202 Human Anatomy & Physiology II with Lab,
 - BIOL 240 Human Anatomy & Physiology (Comprehensive)

e. Medical Terminology:

- One (1) course in Medical Terminology that introduces healthcare vocabulary and wordbuilding skills, such as:
 - HSCI 110 Medical Terminology
 - o AH 105 Medical Terminology for Health Professions

f. General Physics:

- One (1) introductory General Physics course, which may be algebra-based or calculusbased, such as:
 - PHYS 101 General Physics I (Algebra-based)
 - o PHYS 111 College Physics I with Lab
 - PHYS 201 University Physics I (Calculus-based)

Important Notes:

- Course titles and numbers listed above are **examples only**. Equivalent courses may have different names and numbers depending on the institution where they were taken.
- All prerequisite courses must be completed with a grade of C (2.0 on a 4.0 scale) or higher.
- Courses completed on a pass/fail basis will not satisfy the prerequisite unless the transcript clearly indicates that a "pass" is equivalent to a grade of C or higher.
- Applicants are encouraged to complete all prerequisite coursework prior to applying; however, applications may be considered if no more than two (2) prerequisite courses are in progress at the time of application. Proof of enrollment in outstanding courses must be provided, and all prerequisites must be completed before matriculation.

For questions about whether a specific course meets a prerequisite, applicants should submit the course syllabus or description to the Office of Admissions for review.

Cardiac and Vascular Institute of Ultrasound Application for Admission

Program Applying For:		For Office Use Only
☐ Cardiac Program (one-year)		Date Received:
☐ Vascular Program (one-year)		☐ Official Transcripts Received
\square Cardiovascular Program (eighteen-m	onth)	☐ In person interview ☐ Phone interview
Prerequisite Option: □ Bachelor's Degree or higher □ Associate Degree □ No degree, at least 48 college credits Desired Start Quarter/Year: CVIU is now accepting applications for too f 2027 and future terms. □ Winter of 20 □ Spring of 20		Date/Time: Learning Ability Test: ACT/SAT Score: Prerequisites: Clinicals: Notes:
☐ Summer of 20 ☐ Fall of 20		
Please print clearly and legibly:		
	l ast name:	Middle Initial:
Tull Harrie.	_ Last Hamo	
Social Security Number:		Date of birth:
Mailing Address:		
City:	State: _	Zip:
Phone Number (including area code): _		
Email address:		
Emergency Contact:		
Full name (Last, First, Middle Initial):		
Mailing Address:		
City:	State: _	Zip:
Phone Number (including area code): _		
Relation to applicant:		
Education: High school:		City/State:
□ Diploma □ GED	Graduation or	completion Month/Year

Post-secondary Education History:

Please list all colleges, universities, or technical schools you have attended: Graduation Date or Type of Degree Field of Study or City, State Institution Name Last Date Attended Awarded Major or "None" (MM/DD/YYYY) Please provide a brief summary of your work experience and/or college education over the past few years: Please provide a brief overview of your experiences and/or research that have inspired your interest in pursuing a career in cardiac and/or vascular ultrasound: ______ How did you hear about CVIU? (If you hear about CVIU from a graduate, family member, etc. please list their name above) Have you viewed the CVIU Catalog online? ☐ Yes ☐ No If no, please review the catalog at: https://www.ultrasound.edu/assets/uploads/CVIU-Catalog-Spring-2025.pdf Have you received Federal Student Aid from any college or university in the past year? ☐ Yes ☐ No Have you ever been convicted of a felony offense? ☐ Yes □ No If yes, please include an explanation upon submission of this application.

Please note: Typed signatures are not accepted.

Signature:

I certify that the information provided above is accurate and complete. I understand that withholding or providing false information may disqualify me from acceptance and could be grounds for dismissal.

Date: _____

All signatures must be either a handwritten (wet) signature or a verified digital signature.

ATTESTATION OF HIGH SCHOOL GRADUATION OR EQUIVALENCY

l,	, ha\	e applied for admissions as a student
of the Cardiac and Vascular Institute of Ultras	ound (CVIU).	
I understand that one requirements for admiss	sion to CVIU is gr	aduation from a high school or its
equivalency.		
I hereby certify that:		
Initial I graduated from Name of	High School	
City:	State:	Graduation date:
I earned a GED at Initial Name of	of Testing Facility	
City:	State:	Graduation date:
If for any reason, this attestation of high scho untrue, I understand that I will not have met Institute of Ultrasound and I will not be con immediate dismissal from the Cardiac and Vas	an admission redusidered a regula	quirement of the Cardiac and Vascular r student and thus, will be subject to
Furthermore, I understand that if this attestation and any state or institutional financial aid that appropriate source, and I will be responsible Ultrasound for any and all money refunded.	t was distributed	on my behalf must be refunded to the
By my signature below, I attest that the in best of my knowledge.	formation provid	led above is true and correct to the
Student Signature:		Date:

Please note: Typed signatures are not accepted.
All signatures must be either a handwritten (wet) signature or a verified digital signature.